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Number of pages with cover page:	18
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**Contents of this Transmission:**

Atty Docket No. 476172000100:

Inventor: Calvin B. GRIGSBY

Application No.: 09/896,831

Filing Date: June 28, 2001

Group Art Unit: 3628

Examiner: C. B. Graham

**Title: METHOD AND APPARATUS FOR OFFERING, PRICING, AND SELLING  
SECURITIES OVER A NETWORK****Documents:**

Transmittal (1 page)

Fee Transmittal w/duplicate copy for fee processing (2 pages)

Petition for Extension of Time 2-months (1 page)

Amendment in Response to Non-Final Office Action (13 pages)

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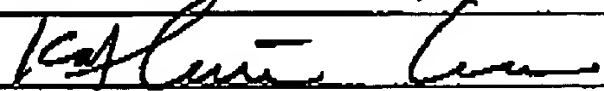
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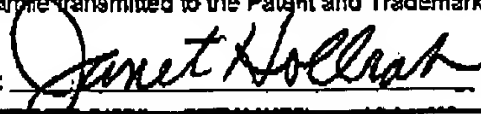
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/896,831	
	Filing Date	June 28, 2001	
	First Named Inventor	Calvin B. GRIGSBY	
	Art Unit	3628	
	Examiner Name	C. B. Graham	
Total Number of Pages in This Submission	17	Attorney Docket Number	476172000100

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form w/duplicate copy for fee processing (2 pages) <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply (13 pages) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request (1 page) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Facsimile Return Receipt Cover
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	MORRISON & FOERSTER LLP (Customer No. 20872)		
Signature			
Printed name	Katherine D. Lee		
Date	October 3, 2006	Reg. No.	44,865

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Dated: October 3, 2006	Signature:  (Janet Hollrah)

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PTO/SB/17 (01-06)


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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		<b>Complete if Known</b>	
<b>FEE TRANSMITTAL</b> <b>For FY 2006</b>		Application Number	09/898,831
		Filing Date	June 28, 2001
		First Named Inventor	Calvin B. GRIGSBY
		Examiner Name	C. B. Graham
		Art Unit	3628
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	476172000100
<b>TOTAL AMOUNT OF PAYMENT</b>		<b>(\$)</b>	<b>225.00</b>

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify):	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: <u>03-1952</u> Deposit Account Name: <u>Morrison &amp; Foerster LLP</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

<b>FEE CALCULATION</b> (All the fees below are due upon filing or may be subject to a surcharge.)							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	0
Design	200	100	100	50	130	65	0
Plant	200	100	300	150	160	80	0
Reissue	300	150	500	250	600	300	0
Provisional	200	100	0	0	0	0	0
<b>2. EXCESS CLAIM FEES</b>							
<b>Fee Description</b>							<b>Small Entity Fee (\$)</b>
Each claim over 20 (including Reissues)							50
Each independent claim over 3 (including Reissues)							200
Multiple dependent claims							360
<b>Total Claims</b>							<b>Fee Paid (\$)</b>
32 - 37 = 0 x 25 =							0
HP = highest number of total claims paid for, if greater than 20.							180
<b>Indep. Claims</b>							<b>Fee Paid (\$)</b>
13 - 16 = 0 x 100 =							0
HP = highest number of independent claims paid for, if greater than 3.							0
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>			
- 100 =	150	(round up to a whole number) x	=	0			
<b>4. OTHER FEE(S)</b>							
Non-English Specification, \$130 fee (no small entity discount)							0
Other (e.g., late filing surcharge): 2252 Extension for response within second month							225.00

<b>SUBMITTED BY</b>			
Signature		Registration No. (Attorney/Agent)	44,865
Name (Print/Type)	Katherine D. Lee	Telephone	(415) 268-6983
		Date	October 3, 2006

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